

**COMMONWEALTH OF VIRGINIA
MOTOR VEHICLE DEALER BOARD
2201 WEST BROAD STREET, SUITE 104
RICHMOND, VIRGINIA 23220**

**APPLICATION FOR PERMANENT/TEMPORARY SUPPLEMENTAL
MOTOR VEHICLE DEALERS LICENSE**

FOR LICENSE YEAR ENDING _____

MVDB USE ONLY	
DEALER # _____	
FEE \$ _____	

**TYPE OF APPLICATION
(CHECK ONE)**

☐

Permanent Supplemental Motor Vehicle (See requirements below)

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Temporary Supplemental Motor Vehicle (See requirements below)

Sale begins (date) _____
and ends _____

NAME OF BUSINESS		TRADING AS NAME		DEALER CERTIFICATE NUMBER		DEALER BUSINESS PHONE		
ADDRESS OF PRINCIPAL LOCATION (P.O. BOX <u>ONLY</u> IS NOT ACCEPTABLE)			CITY		STATE		ZIP CODE	
OWNER'S NAME			OWNER'S ADDRESS					

REQUIREMENTS:

Permanent Supplemental Locations -- For premises less than five hundred (500) yards from your principal place of business. A supplemental license is required for each location you operate or propose to operate for the display and sale of motor vehicles that is not on property adjoining your principal place of business. A fee is charged for each supplemental location listed.

Temporary Supplemental Location – APPLICATION MUST BE SUBMITTED AT LEAST FIFTEEN (15) DAYS PRIOR TO SALE IN ACCORDANCE WITH §46.2-1516. MOTOR VEHICLE SALES CANNOT EXCEED SEVEN DAYS PER LICENSE. A FEE OF \$40.00 PER LICENSE MUST ALSO BE SUBMITTED WITH THE APPLICATION.

NEW MOTOR VEHICLE OFF-SITE SALES: SEE ABOVE REQUIREMENT FOR APPLICATION DEADLINE. You must include with this application a copy of that part of your franchise/sales/service agreement which shows that the proposed location is exclusively within your area of responsibility.

If the location is **NOT** exclusively within your area of responsibility as defined in your franchise or sales agreement, prior to the license being issued, you must also provide a letter from other dealers of the same line-make who may share or have an overlapping area of responsibility as defined in their franchise or sales agreement do not object to you being granted a temporary supplemental license to hold the sale. A list of the same line-make dealers contacted must be furnished. (LIST DEALERS CONTACTED ON REVERSE SIDE OF THIS FORM) **NOTE:** If sale involves used vehicles, see requirements for used motor vehicle off-site sales.

FOR USED MOTOR VEHICLE OFF-SITE SALES: SEE ABOVE REQUIREMENT FOR APPLICATION DEADLINE. If the sale is being conducted in other than the county, city or town in which you are licensed or adjoining (contiguous) county, city or town, you must send a letter of invitation to all other dealers in the county, city or town in which the sale will occur at least thirty (30) days prior to the sale. Copies of the invitation and a list of dealers contacted must be submitted with application.

Address of each supplemental location: IF EACH LOCATION IS NOT WITHIN THE INCORPORATED LIMITS OF A CITY, YOU MUST SPECIFY THE COUNTY OR TOWN.

STREET	CITY	STATE	ZIP CODE	JURISDICTION
1.				

FRANCHISED MOTOR VEHICLE DEALERS:
(REV. 11/97)

MVDB 22

List below the line-makes of new motor vehicles for which you have a franchise or sales agreement and which you plan to sell at the supplemental location(s).

LINE-MAKE(S)

THIS INFORMATION MUST BE COMPLETED FOR TEMPORARY SUPPLEMENTAL APPLICATIONS

ALL DEALERS:

In order to process applications in a timely manner, you must send to your coordinator (sponsor/promoter) the completed application, attachments and check or money order for fee made payable to Motor Vehicle Dealer Board or send documents directly to the Board.

Coordinators send completed package of all participating Dealers applications, documents and fees to the Motor Vehicle Dealer Board. If you need assistance in preparing your package, please contact the Board at (804) 367-1100.

SPONSOR'S FIRM NAME

PROMOTER'S NAME

TELEPHONE NUMBER OF PROMOTER

NAMES, ADDRESSES AND PERMISSION LETTERS FROM ALL DEALERS CONTACTED: (Use additional sheets as necessary)

- 1.
- 2.
- 3.
- 4.
- 5.

I certify and affirm under penalty of perjury that the information contained in this application is true and correct to the best of my knowledge. I understand that it is unlawful to knowingly make a false statement and any violation will be punishable as a Class 2 misdemeanor.

By _____
(Signature must be owner, partner or officer of the corporation)

Date _____